



## South Dakota Board of Nursing

South Dakota Department of Health  
722 Main Street, Suite 3; Spearfish, SD 57783  
(605) 642-1388; Fax: (605) 642-1389; www.state.sd.us/doh/nursing

### Medication Aide Application for Faculty Changes to a Currently Approved Training Program

Approved programs must submit, within 30 days after a change, any substantive changes made to the program during their 2-year approval period. Written approval or denial of a requested change will be issued within 90 days after receipt of the application. Send completed application and supporting documentation to:

South Dakota Board of Nursing  
722 Main Street, Suite 3  
Spearfish, SD 57783

Name of Institution: Avera Education & Staffing Solutions

Address: 1000 West 4th Street, Suite 9

Yankton, SD 57078

Phone Number: 605-668-8475

Fax Number: 605-668-8483

AESS Program Instructor: Gwen Maag, RN (SD: R032347 Expires: 05/29/2016) gmaag@avera.org

Verified by: (SD BON)

Facility: Avera Sister James Care Center/ Avera Yankton Care Center

Location: Yankton, SD

Facility RN Clinical Sponsor/Instructor(s):

Maxine Willman RN; SD license # R012309; Expires: 2/1/2016

Verified by: (SD BON)

\_\_\_\_ RN; SD license # \_\_\_\_\_; Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Verified by: (SD BON)

\_\_\_\_ RN; SD license # \_\_\_\_\_; Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Verified by: (SD BON)

\_\_\_\_ RN; SD license # \_\_\_\_\_; Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Verified by: (SD BON)

AESS Program Instructor Signature: Gwen Maag

Date: 05/30/14

Administrator/DON/ADON Signature: Cindy Sago

Date: 5/30/14

#### This section to be completed by the South Dakota Board of Nursing

Date Application Received: <u>6/1/14</u>	Date Application Denied:
Date Approved: <u>April 2016</u>	Reason for Denial:
Expiration Date of Approval:	
Board Representative:	
Date Notice Sent to Institution:	

May 2014